

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/597,171

FILING DATE
07-13-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	J					51						
2		I					52						
3		I					53						
4		I					54						
5		I					55						
6		I					56						
7		I					57						
8	I						58						
9		I					59						
10		I					60						
11		I					61						
12		I					62						
13		I					63						
14		I					64						
15		I					65						
16		I					66						
17		I					67						
18		I					68						
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41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2												
TOTAL DEP.	16	←		←		←							
TOTAL CLAIMS	18												